Background

Confidentiality of medical information has been recognized as an important component of medical care since the time of Hippocrates. If patient-specific medical information were made available to the public, many persons in need of care would resist seeking and receiving medical attention resulting in their untreated illness progressing to a much more serious stage. This issue is even more relevant with respect to healthcare and other licensed professionals with a potentially impairing illness. Addiction and psychiatric illnesses are associated with public and peer misunderstanding, prejudice and stigma. Fear of judgment, the desire to protect one’s privacy, the real threat of professional consequences and public discipline may encourage professionals to avoid the formal health care system or to seek alternative care. Care for an addictive illness through peer-support organizations such as Alcoholics Anonymous can be extremely helpful; however, self-help groups alone may prove insufficient. Healthcare and other licensed professionals who avoid care or seek misguided private assistance deprive themselves of the proven benefits available through professional evaluation, treatment and PHP monitoring. PHP-orchestrated accountability oversight and support has been proven to promote accountability via the PHP enhances positive outcomes.

Since early diagnosis and intervention are unquestionably beneficial goals, it is of paramount importance for healthcare and other licensed professionals with potentially impairing illnesses to confidently seek - or be receptive to - confidential assistance without fear of unwarranted professional sanction. The alternatives to discipline that are available via PHPs promote the utilization of proven, reliable and available resources to assist the ill professional. The confidentiality of PHP processes is vital in promoting early detection, intervention, treatment and monitoring for professionals with potentially impairing illnesses, thereby enhancing public safety.
Healthcare and other licensed professionals, like other human beings, develop illnesses requiring appropriate diagnosis and treatment. As with other occupations potentially impacting public safety, such as Department of Transportation regulated CDL drivers and commercial airline pilots, early diagnosis and successful treatment of potentially impairing illness prior to the actual “functional impairment”, is an important issue of public concern and safety (see Public Policy Statement #2; Illness versus Impairment in Healthcare and Other Licensed Professionals).

Physicians providing diagnosis and treatment to their medical colleagues should not be required to report any aspects of their healthcare and other licensed professional patient’s medical history to governmental or judicial bodies in any manner not consistent with that of other patients. When Regulatory Agencies such as Licensure Boards have a need for information from a clinician, such information should be released only with the appropriate written consent direct from the clinician from whom the information is being sought. Treatment providers should provide clinical information in a summation letter of the issues, in lieu of releasing the patient’s entire medical record. These letters/reports should be reviewed by qualified personnel with expertise in matters of professional health, such as staff of the applicable state PHP. Where necessary, laws should be adopted to allow for the use of appropriately detailed summation letters.

Historically, there has been an effort to require that healthcare and other licensed professionals with a potentially impairing illness reveal excessively detailed personal medical information to Regulatory Agencies and frequently the general public. This level of public disclosure surrounding healthcare and other licensed professionals with potentially impairing illness violates the rights to privacy and the basic tenants of confidentiality. Such disclosure may actually have the unintended consequence of compromising public safety by deterring the ill healthcare and other licensed professional with potentially impairing illness in seeking assistance. While the public has a right to some information gathered by a Regulatory Agency about demonstrable functional impairment resulting in public board disciplinary action, the disclosure of a recovering professional’s excessively detailed personal medical information is neither beneficial nor appropriate.

The American Society of Addiction Medicine recommends:

1) Healthcare and other licensed professionals experiencing potentially impairing health problems should have the same rights of privacy as do other patients in clinician-patient relationships. Personal health status information, per se, about healthcare and other licensed professionals, should not be publicly disclosed.

2) When applying for medical staff membership, managed care provider panel participation, or other employment related matters, a recovering professional should not be required to reveal non-essential personal medical information in any manner not required of all other non-recovering professionals.
3) A confidentiality clause for recovering professionals provided by specific state legislation via participation with a state’s Professionals Health Program is preferable. Regardless of legislative status confidentiality should be respected.

4) The confidentiality inherent in Professionals Health Programs should be recognized as an essential feature of such programs. ASAM acknowledges and supports the importance of confidentiality of PHP participants with a mechanism in place allowing immediate notification of the Board whenever a professional with potentially impairing illness is felt to be an imminent threat to the public.

5) Application forms for medical licensure, medical staff privileges, provider panel membership and related items should be constructed in a way allowing recovering professionals with a potentially impairing illness to maintain their confidentiality when under a contract of participation with a state PHP. Questions on such forms should be limited to current medical conditions potentially impacting the applicant's ability to safely perform their duties. .